FILED

☐ Change

☐ Addition

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2001 UNIFORM BUSINESS REPORT (UBR)									
DOCUMENT # N9500001765 1. Entity Name					Sep 06, 2001 8:00 am Secretary of State				
OAK H	amlet at Wellington's E	dge property own	IERS'	(AV		09-06-2001 90010	0 046 ****61.25		
Principal Pla	ce of Business	Mailing Address							
C/O GLEN N	MANAGEMENT SERVICES		C/O GLEN MANAGEMENT SERVICES			DU1103734			
BOCA RATO	no gärdens blyd n pl 33432	P O BOX 1390/ BOCA RATON PL 33432	P O BOX 1390/ BOCA RATON PL 33432						
US	/ `	US /			! 		India ngari (1812) anda nakan na	11891	
1883	Place of Business OAK BERRY CIK								
Suite, Apt	. #, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN 1	HIS SPACE		
	INGTON, FL	City & State WELLING	ON, FI	_	4. FEI Numbe	⁹ 65-0564124	Applied Not App		
Zip 334	FIY US	33414	Country		5. Certificate	of Status Desired	\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
Name					BETTY MURRAY				
GLEN MANAGEMENT SERVICES SIT					Agergas (B.O. Box Number is Not Acceptable)				
301 W CAMINO CARDENS BLVD BOCA RATON FL 33432									
City WELLINGTON FL ZigCg								4	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.									
(30)									
SIGNATURE	X/Delly/1/	Muerray						_	
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signal	ure required	when reinstating)	D	ATE /		
1	FILE NOW:	9. Election Campaign	Financing	\$5.0	0 May Be	Make Che	ck Payable to	-	
FEE IS \$61.25		,			to Fees Department of State				
10.	OFFICERS AND DIF	RECTORS	11,		ADDITIONS/CH/	ANGES TO OFFICERS AN	D DIRECTORS IN 10		
TITLE	DP	Qelete	TITLE	DP				Addition	
NAME STREET ADDRESS	TRAUTMAN, ROBERT 4301 OAK CIR 23		NAME STREET ADDRESS		83 OA	NURRAY K BERRY (CIR.		
CITY-ST-ZIP	BOCA RATON FL 33431		CITY-ST-ZIP		ELLING	FTON FL.	33414		
TITLE	DT	Delete	TITLE	PT	<u> </u>	·/···	☐ Change 💢 A	ddition	
NAME STREET ADDRESS	KAPUSTEIN, WALTER		NAME CTOSET ADDRESS		NALD !	- SPENCE	R	`	
CITY-ST-ZIP	4301 OAK CIR 23 BOCA RATON FL 33431		STREET ADDRESS CITY-ST-ZIP		47 OF	TON FL	CIR. 33414		
TITLE	DS	Delete	TITLE	DV				ddition	
NAME STREET ADDRESS	PLATT, RONALD	والموادات المحادث يتهيهما يوادي	NAME STREET ADDRESS	- H.A.	L AB	ERCROMBIE IAK BEND	WAY	• • [•	
CITY-ST-ZIP	4301 OAK CIR 23 BOCA RATON FL 33431		CITY-ST-ZIP	<i>พ</i>	799 0 LLING		33414		
TITLE		☐ Delete	TITLE	DS		/	<u>'</u>	ddition	
NAME STREET ADDRESS			NAME STREET ADDRESS		BERTA				
CITY-ST-ZIP			CITY-ST-ZIP	16	48 OA LL(NG	TON FL.	CIR 33414	1	
TITLE		☐ Delete	TITLE	D			☐ Change	ddition	
NAME STREET ADDRESS			NAME STREET ADDRESS	10	HN CO	NDRAY BERRY	CIR		
CITY-ST-ZIP			CITY-ST-ZIP				23414	{	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

SIGNATURE: X Walley M. W. Wast

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP